



UNCLASSIFIED

June 1, 2021

MEMO FOR ROBERT SCOTT, U.S. AMBASSADOR TO MALAWI

SUBJECT: PEPFAR Malawi’s Country Operational Plan 2021 Approval

This memo represents the successful completion of the PEPFAR Malawi Country Operational Plan (COP) 2021 planning, development and submission. PEPFAR Malawi, together with the partner government, civil society and multilateral partners, has planned and submitted a COP 2021 in alignment with the directives from the COP 2021 planning letter, data-driven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval for the PEPFAR Malawi Country Operational Plan (COP) 2021 with a total approved budget of \$181,402,151, including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

	New Funding (All Accounts)	Pipeline	Total Budget FY 2022 Implementation
TOTAL	172,999,236	8,402,915	181,402,151
Bilateral	172,214,236	8,402,915	180,617,151
Central	785,000		785,000

The total FY 2022 outlay for COP 2021 implementation shall not exceed the total approved COP 2021 budget of \$181,402,151 without additional written approval. Any prior year funds that are not included within this COP 2021 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2022 without additional written approval. The new FY 2021 funding and prior year funds approved within this memo as a part of the total COP 2021 budget are allocated to achieve specific results, outcomes and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2022– must be submitted to and approved by S/GAC.

Approved funding will be made available to agencies for allocation to country platform to implement COP 2021 programming and priorities as outlined below and in the appendix.

Background

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, local and global stakeholders and partners during the April 26-27th, 2021

virtual planning meetings and participants in the virtual approval meeting; the final COP2021 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

Funding and targets for Malawi's Country Operational Plan (COP) 2021 will support PEPFAR Malawi's vision in partnership with the Government and people of Malawi to sustain epidemic control by targeting testing to efficiently identify people living with HIV (PLHIV), ensuring all newly diagnosed PLHIV are immediately linked to treatment, and all PLHIV are retained on treatment and remain virally suppressed. COP 2021 will work to maintain epidemic control by the end of FY 2022, across all ages and sexes, working toward the ultimate goal across the country that 957,262 are on life-saving treatment by the end of FY 2022. The program for COP 2021 will focus intensely on the highest burdened geographic areas and facilities by enrolling an additional 79,646 PLHIV on treatment in FY 2022 and ensuring viral load suppression in 896,666 patients in these areas.

The PEPFAR Malawi strategy for programming to be implemented in FY 2022 will make up for lost ground by shifting demand creation activities for pre-exposure prophylaxis (PrEP), voluntary medical male circumcision (VMMC), and other community-based prevention programs to virtual, one-on-one, or small group approaches. PEPFAR Malawi will expand DREAMS eligibility to young women in institutions of higher learning and will rely upon the fully functional DREAMS database to track layering services and completion of the primary package while investing in the Historically Black Colleges and University (HBCU) initiative that will complement efforts to increase formal economic opportunities for DREAMS AGYW.

COP 2021 will build on the comprehensive COP 2020 strategy focusing on client-centered care to sustain the large cohort on treatment and efficient case finding, while ensuring service resilience within the on-going context of the COVID-19 pandemic. COP 2021 will respond to inputs from stakeholders and will expand Community-led Monitoring to address barriers being faced by clients, especially populations yet to reach epidemic control (children under five years and young men and women). Specific client-centered approaches to be scaled up in COP 2021 include: decentralized ART delivery, family-focused approaches to client care, and Advanced HIV Disease models.

PEPFAR Malawi will provide HIV impact mitigation, prevention, and treatment services to 158,439 OVC ages 0-17 years and their caregivers to address contributing factors to vulnerability with particular focus on: 1) actively facilitating testing for all children at risk of HIV infection; 2) facilitating linkage to treatment, support for continuity of treatment, and viral suppression, and providing case management for vulnerable children and adolescents living with HIV; and 3) reducing risk for adolescent girls in high HIV-burden areas and providing HIV and sexual violence prevention for the 9-14 year-old girls and boys.

Key Populations (KP) programming is an integral part of the COP21 strategy in Malawi. The KP program districts are in the nine high-burden districts of Blantyre, Machinga, Zomba, Mangochi, Lilongwe, Chikwawa, Chiradzulu, Mwanza, and Mzimba. The KP program continues to provide

a cascade of comprehensive HIV prevention, care, and treatment services through eighteen drop-in centers, mobile hotspot outreach, and supported KP-friendly public facilities.

In conjunction with the 2019 Sustainability Index Dashboard (SID), information and insights gleaned from MER and SIMS data all point to the need for PEPFAR investments to focus on improved service delivery and broader health systems strengthening, including right-sizing the number of skilled professional cadres; advancing the quality and depth of national, district, and site-level governance and accountability; bolstering the management of HIV services; and recognizing that data ecosystems inform rational decision-making and demonstrate the gains made in HIV prevention, treatment, and viral load interventions.

Key updates in COP21

PEPFAR Malawi’s COP 2021 strategy is designed to accelerate delayed interventions outlined in the COP20 Strategic Direction Summary (SDS), repair prevention programs which experienced significant setbacks due to policy restrictions, and “Build Back Our Programs Better” - leveraging the smart adaptations developed in response to COVID-19 to improve the resiliency of HIV programs against the backdrop of dual pandemics. The overarching focus will be on building better, stronger, more resilient health systems; continuing to build strong partnerships with local organizations; and, strengthening the public health response systems. Building upon the COP 2020 back-to-care surge strategy, PEPFAR Malawi remains committed to actively addressing barriers clients face in adhering to treatment by increasing service delivery access points and extending operational hours for client convenience. PEPFAR Malawi is implementing integrated service delivery models to reduce waiting times and telehealth to maximize spacing of in-person visits. PEPFAR Malawi is also supporting the capacity of District Health Offices to oversee and implement such programs, reinforcing the GoM decentralization plans and paving the way for transitioning of PEPFAR programming to the government and local entities.

American Rescue Plan Act of 2021 Summary Description

This memo approves \$8,789,250 in ARPA funds in the Economic Support Fund (ESF) account to be implemented for activities during COP 2020 and COP 2021. Of the total \$8,789,250 in ARPA funds, \$5,617,151 is expected to be implemented in COP 2021. The remaining \$3,172,099 is expected to be implemented in COP 2020. The table below shows the estimated breakout of outlays in COP 2021 versus COP 2020 by implementing agency and operational division.

Operating Unit:	<input type="text" value="Enter Operating Unit"/>	Agency/OPDIV	ARPA Funds Programmed in COP21 FAST for COP21 Outlay	ARPA Funds To be Added to COP20 for COP20 Outlay	TOTAL ARPA Funds
Malawi	Malawi	TOTAL	5,617,151.00	3,172,099.00	8,789,250.00
Malawi	Malawi	DOD	317,000.00	-	317,000.00
Malawi	Malawi	HHS/CDC	4,011,111.00	-	4,011,111.00
Malawi	Malawi	HHS/HRSA	-	-	-
Malawi	Malawi	PC	-	-	-
Malawi	Malawi	USAID	1,289,040.00	1,992,106.00	3,281,146.00
Malawi	Malawi	USAID/WCF	-	1,179,993.00	1,179,993.00

Any ARPA funds not outlayed in COP 2020 will be allowed to outlay in COP 2021, and this will be accounted for in the End of Fiscal Year exercise in the Fall of 2021. The entire ARPA

amount must be obligated by September 30, 2022 should, except in extraordinary circumstances, be outlaid during COP 2021.

ARPA funds are provided specifically to address the intersection of HIV and COVID-19, specifically to prevent, prepare for, and respond to coronavirus (including prevention of COVID-19 infection, illness, and death among PEPFAR beneficiaries and staff), mitigate COVID-19 impact on PEPFAR programs and beneficiaries and support PEPFAR program recovery from the impacts of coronavirus.

Over the course of COP20 and COP21, PEPFAR Malawi requested \$8,789,250 to mitigate COVID-19's impact on HIV/AIDS programs and beneficiaries and support program recovery from the impacts of COVID-19. The ongoing pandemic continues to challenge the safe delivery of health services. This funding request represents PEPFAR/Malawi's strategy to adapt service delivery and keep both frontline healthcare providers and clients living with HIV, safe. To facilitate rapid identification and isolation of suspected COVID-19 among clients and healthcare workers in PEPFAR supported facilities, PEPFAR/Malawi is requesting Infection Prevention and Control Programming (IPC) resources to improve infection prevention policies and procedures both at the facility and community level for the current pandemic, and for the future as well.

Additionally, access to COVID testing is a challenge, particularly at rural health facilities and in the surrounding communities given the lack of sufficient trained staff to conduct COVID-19 contact tracing. Additionally, PrEP scale-up plans and prevention programs targeting Key Populations and adolescent girls and young women (AGYW) were significantly impacted by COVID-19 with most community-based activities suspended for the majority of 2020. Resources are requested to optimize contact tracing among vulnerable populations and train lay cadres and HIV Surveillance Assistants to deliver COVID-19 testing and generate demand for services. The COVID-19 pandemic has also adversely impacted VMMC service delivery due to suspension of VMMC as a non-critical service by the Ministry of Health. Support requested will be used to ramp up demand creation activities and provide PPE to participants. Case finding, particularly community index testing, was also suspended due to COVID-19.

PEPFAR's investments in laboratory strengthening over the last two decades has been invaluable to Malawi's national response to COVID-19. Nevertheless, the increased demands on an already stretched system has exponentially burdened viral load platforms which are dually used for PCR testing. Resources to address capacity constraints on Malawi's laboratory system is a key component of Malawi's ARPA strategy.

Faith and Communities Initiative (FCI)

The implementation of the FCI has been significantly delayed by COVID. Accordingly, any remaining FCI funds at the end of COP20 will be allowed to carry over into COP21. After exact amounts of carryover are determined during the End of Fiscal Year process in fall of 2021, COP 21 envelopes will be updated to account for this carryover.

Recency

The implementation of the Recency activities has also been significantly delayed by COVID. Accordingly, any remaining Recency funds at the end of COP20 will be allowed to carry over into COP21. After exact amounts of carryover are determined during the End of Fiscal Year process in fall of 2021, COP 21 envelopes will be updated to account for this carryover.

MPHIA

An interagency review of the PHIA results will be conducted by Malawi and agency headquarters to understand the implications of the findings. Program results and targets can be changed based on PHIA findings.

Pending Congressional

Funding Summary

All COP 2021 funding summarized in the charts below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in all PEPFAR systems and summarized in the appendix.

	of which, Bilateral									Total COP21 Budget (Bilateral + Central)	
	Total	New Funding							Applied Pipeline		
		Total	FY 2021				FY 2020	FY 2019			
		Total	GHP-State	GHP-USAID	GAP	ESF	GHP-State	GHP-State			
TOTAL	180,617,151	172,214,236	172,214,236	165,084,585	-	1,512,500	5,617,151	-	-	8,402,915	181,402,151
DOD Total	3,337,512	2,929,490	2,929,490	2,612,490	-	-	317,000	-	-	408,022	3,337,512
DOD	3,337,512	2,929,490	2,929,490	2,612,490	-	-	317,000	-	-	408,022	3,337,512
HHS Total	96,444,791	95,747,972	95,747,972	90,224,361	-	1,512,500	4,011,111	-	-	696,819	96,444,791
HHS/CDC	95,444,791	94,747,972	94,747,972	89,224,361	-	1,512,500	4,011,111	-	-	696,819	95,444,791
HHS/HRSA	1,000,000	1,000,000	1,000,000	1,000,000	-	-	-	-	-	-	1,000,000
PC Total	1,967,177	-	-	-	-	-	-	-	-	1,967,177	1,967,177
PC	1,967,177	-	-	-	-	-	-	-	-	1,967,177	1,967,177
STATE Total	1,860,903	360,903	360,903	360,903	-	-	-	-	-	1,500,000	1,860,903
State	187,296	187,296	187,296	187,296	-	-	-	-	-	-	187,296
State/AF	1,673,607	173,607	173,607	173,607	-	-	-	-	-	1,500,000	1,673,607
USAID Total	77,006,768	73,175,871	73,175,871	71,886,831	-	-	1,289,040	-	-	3,830,897	77,791,768
USAID, non-WCF	72,865,393	69,105,536	69,105,536	67,816,496	-	-	1,289,040	-	-	3,759,857	72,865,393
USAID/WCF	4,141,375	4,070,335	4,070,335	4,070,335	-	-	-	-	-	71,040	4,926,375

1/*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2022.*

2/*Economic Support Fund (ESF) funding is authorized in the American Rescue Plan Act of 2021 and must be used for a combined HIV and COVID purpose.*

	of which, Central									Total COP21 Budget (Bilateral + Central)	
	Total	New Funding							Applied Pipeline		
		Total	FY 2021				FY 2020	FY 2019			
		Total	GHP-State	GHP-USAID	GAP	ESF	GHP-State	GHP-State			
TOTAL	785,000	785,000	785,000	-	785,000	-	-	-	-	-	181,402,151
DOD Total	-	-	-	-	-	-	-	-	-	-	3,337,512
DOD	-	-	-	-	-	-	-	-	-	-	3,337,512
HHS Total	-	-	-	-	-	-	-	-	-	-	96,444,791
HHS/CDC	-	-	-	-	-	-	-	-	-	-	95,444,791
HHS/HRSA	-	-	-	-	-	-	-	-	-	-	1,000,000
PC Total	-	-	-	-	-	-	-	-	-	-	1,967,177
PC	-	-	-	-	-	-	-	-	-	-	1,967,177
STATE Total	-	-	-	-	-	-	-	-	-	-	1,860,903
State	-	-	-	-	-	-	-	-	-	-	187,296
State/AF	-	-	-	-	-	-	-	-	-	-	1,673,607
USAID Total	785,000	785,000	785,000	-	785,000	-	-	-	-	-	77,791,768
USAID, non-WCF	-	-	-	-	-	-	-	-	-	-	72,865,393
USAID/WCF	785,000	785,000	785,000	-	785,000	-	-	-	-	-	4,926,375

1/*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2022.*

2/*Economic Support Fund (ESF) funding is authorized in the American Rescue Plan Act of 2021 and must be used for a combined HIV and COVID purpose.*

GHP-State Funds: Upon the clearance of a FY 2021 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2022 at approved COP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

CDC GAP Funds: With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2022 at approved COP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

GHP-USAID Funds: With the receipt of this signed memo, USAID is approved to use GHP-USAID funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2022 at approved COP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, GHP-USAID funding may be made available to country teams per USAID internal processes and following agency requirements.

ARP ESF Funds: ESF funds must have both an HIV and COVID related purpose as laid out in relevant S/GAC guidance. Upon the clearance of a FY 2021 PEPFAR ESF Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2022 at approved COP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt, agency headquarters will move the funds to the country platform via each agency's internal process.

Applied Pipeline Funds: With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2022 at approved COP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the COP 2021 total budget level and documented within COP 2021 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: Malawi has planned for programming for FY 2021, FY 2020, and/or FY 2019 GHP-State funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to the Malawi. Upon approval of this memo, the amounts below will become the new earmark controls for the Malawi. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmarks	COP21 Funding Level			
	TOTAL	FY 2021	FY 2020	FY 2019
Care & Treatment	99,420,025	99,420,025	-	-
Orphans and Vulnerable Children	20,498,583	20,498,583	-	-
Preventing and Responding to Gender-based Violence	2,050,000	2,050,000	-	-
Water	200,000	200,000	-	-

AB/Y Earmark Budget Justification

AB/Y Requirement Met.

AB/Y Earmark	COP21 Funding Level				
	TOTAL	FY 2021	FY 2020	FY 2019	Applied Pipeline
TOTAL Prevention Programming	13,017,248	13,017,248	-	-	-
Of which, AB/Y	10,265,277	10,265,277	-	-	-
% AB/Y of TOTAL Sexual Prevention Programming	78.9%	78.9%	N/A	N/A	N/A

1/Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2022.

COP21 Initiatives by Agency

	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Central - New Funding	Total Bilateral - New Funding	Total COP21 Budget
TOTAL	-	8,402,915	785,000	172,214,236	181,402,151
<i>of which, Cervical Cancer</i>	-	-	-	3,500,000	3,500,000
<i>of which, Community-Led Monitoring</i>	-	-	-	694,898	694,898
<i>of which, Condoms (GHP-USAID Central Funding) (Central)</i>	-	-	785,000	-	785,000
<i>of which, Core Program</i>	-	5,970,197	-	135,042,142	141,012,339
<i>of which, DREAMS</i>	-	791,089	-	19,208,911	20,000,000
<i>of which, HBCU Tx</i>	-	-	-	1,000,000	1,000,000
<i>of which, VMMC</i>	-	1,641,629	-	12,768,285	14,409,914
DOD Total	-	408,022	-	2,929,490	3,337,512
<i>of which, Core Program</i>	-	115,000	-	2,294,441	2,409,441
<i>of which, DREAMS</i>	-	-	-	250,944	250,944
<i>of which, VMMC</i>	-	293,022	-	384,105	677,127
HHS Total	-	696,819	-	95,747,972	96,444,791
<i>of which, Cervical Cancer</i>	-	-	-	2,100,000	2,100,000
<i>of which, Community-Led Monitoring</i>	-	-	-	694,898	694,898
<i>of which, Core Program</i>	-	696,819	-	78,953,595	79,650,414
<i>of which, DREAMS</i>	-	-	-	7,585,000	7,585,000
<i>of which, HBCU Tx</i>	-	-	-	1,000,000	1,000,000
<i>of which, VMMC</i>	-	-	-	5,414,479	5,414,479
PC Total	-	1,967,177	-	-	1,967,177
<i>of which, Core Program</i>	-	1,967,177	-	-	1,967,177
STATE Total	-	1,500,000	-	360,903	1,860,903
<i>of which, Core Program</i>	-	1,500,000	-	360,903	1,860,903
USAID Total	-	3,830,897	785,000	73,175,871	77,791,768
<i>of which, Cervical Cancer</i>	-	-	-	1,400,000	1,400,000
<i>of which, Condoms (GHP-USAID Central Funding) (Central)</i>	-	-	785,000	-	785,000
<i>of which, Core Program</i>	-	1,691,201	-	53,433,203	55,124,404
<i>of which, DREAMS</i>	-	791,089	-	11,372,967	12,164,056
<i>of which, VMMC</i>	-	1,348,607	-	6,969,701	8,318,308

FY 2022 Target Summary

FY 2021 funds are released and COP 2021 applied pipeline is approved to achieve the following results in FY 2022.

Indicator	Age	Attained	Scale-Up: Satu	Scale-Up: Agg	Sustained	Centrally Supj	No Prioritizati	Total
HTS_INDEX	<15	0	13060	0	4193	0	97	17350
HTS_INDEX	15+	0	100508	0	37788	0	3665	141961
HTS_INDEX	Total	0	113568	0	41981	0	3762	159311
HTS_TST	<15	0	90488	0	24492	0	672	115652
HTS_TST	15+	0	1206116	0	578926	0	35419	1820461
HTS_TST	Total	0	1296604	0	603418	0	36091	1936113
HTS_TST_POS	<15	0	3304	0	723	0	51	4078
HTS_TST_POS	15+	0	57457	0	15098	0	2440	74995
HTS_TST_POS	Total	0	60761	0	15821	0	2491	79073
TX_NEW	<15	0	3741	0	891	0	55	4687
TX_NEW	15+	0	57457	0	15062	0	2440	74959
TX_NEW	Total	0	61198	0	15953	0	2495	79646
TX_CURR	<15	0	35972	0	13863	0	327	50162
TX_CURR	15+	0	660833	0	235069	0	11196	907098
TX_CURR	Total	0	696805	0	248932	0	11523	957260
TX_PVLS	<15	0	33498	0	13052	0	297	46847
TX_PVLS	15+	0	618069	0	221566	0	10184	849819
TX_PVLS	Total	0	651567	0	234618	0	10481	896666
CXCA_SCRN	Total	0	113117	0	41621	0	0	154738
OVC_SERV	<18	0	137268	0	300	0	0	137568
OVC_SERV	18+	0	20871	0	0	0	0	20871
OVC_SERV	Total	0	158139	0	300	0	0	158439
OVC_HIVSTAT	Total	0	62606	0	0	0	0	62606
PMTCT_STAT	<15	0	854	0	532	0	13	1399
PMTCT_STAT	15+	0	366940	0	233946	0	878	601764
PMTCT_STAT	Total	0	367794	0	234478	0	891	603163
PMTCT_STAT	<15	0	68	0	18	0	3	89
PMTCT_STAT	15+	0	31045	0	16846	0	54	47945
PMTCT_STAT	Total	0	31113	0	16864	0	57	48034
PMTCT_ART	<15	0	68	0	18	0	3	89
PMTCT_ART	15+	0	30927	0	16810	0	54	47791
PMTCT_ART	Total	0	30995	0	16828	0	57	47880
PMTCT_EID	Total	0	30759	0	16685	0	58	47502
PP_PREV	<15	0	0	0	0	0	1073	1073
PP_PREV	15+	0	87343	0	325	0	822	88490
PP_PREV	Total	0	87343	0	325	0	1895	89563
KP_PREV	Total	0	48352	0	3756	0	0	52108
KP_MAT	Total	0	0	0	0	0	0	0
VMMC_CIRC	Total	0	137242	0	0	0	8458	145700
HTS_SELF	<15	0	32359	0	0	0	0	32359
HTS_SELF	15+	0	520631	0	41831	0	17205	579667
HTS_SELF	Total	0	552990	0	41831	0	17205	612026
PrEP_NEW	Total	0	17357	0	368	0	0	17725
PrEP_CURR	Total	0	18842	0	368	0	0	19210
TB_STAT	<15	0	841	0	320	0	8	1169
TB_STAT	15+	0	10419	0	3465	0	205	14089
TB_STAT	Total	0	11260	0	3785	0	213	15258
TB_ART	<15	0	391	0	99	0	4	494
TB_ART	15+	0	4936	0	1249	0	95	6280
TB_ART	Total	0	5327	0	1348	0	99	6774
TB_PREV	<15	0	2182	0	527	0	32	2741
TB_PREV	15+	0	33517	0	8780	0	1424	43721
TB_PREV	Total	0	35699	0	9307	0	1456	46462
TX_TB	<15	0	37729	0	14031	0	363	52123
TX_TB	15+	0	682375	0	237625	0	12954	932954
TX_TB	Total	0	720104	0	251656	0	13317	985077
GEND_GBV	Total	0	8040	0	0	0	0	8040
AGYW_PREV	Total	0	56204	0	0	0	0	56204

Partner Management and Stakeholder Engagement:

Agreements made during COP 2021 discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with the this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15 percent of target achievement at 3 months or (2) less than 40 percent of target achievement at 6 months must have a complete review of performance data (including trends in performance) and expenditures to date by program area, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX_CURR) performance should be between 98 percent and 100 percent of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10 percent of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80 percent of their target at Q2 performance review should be triggered. For key populations programming, per MER Guidance and program requirements, HIV testing is a required element of the KP_PREV indicator. HIV testing services (HTS) or referring an individual to HTS is required to be offered (at least once during the reporting period and/or in accordance with WHO/national guidance) unless the individual had previously tested positive for HIV. HIV prevention services must be tailored to individual risks. If the individual is self-identified as HIV positive, then HTS provision or referral to HTS will not be a required element of this indicator. Workplans for IPs should reflect these HTS requirements for key populations programming. Additionally, where referral to HTS is made, IP workplans and program design should incorporate measures to follow through on HTS with KP clients to ensure referral completion. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Correction Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. If the issue is linkage of test positive to treatment the indicator measured should be test positive to new in treatment of greater than 85 percent. If the issue is retention it should be net new on treatment equal to 90 percent of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC the options the agency is implementing to address partner non-performance, including options for a shift to new partners. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP 2021 implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of Malawi's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.